



110 Union Street, Suite 500
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Puget Sound Clean Air Agency

Compliance Status Report

Seattle
PSC
NW
4/2/01

Inspection Date: 3/26/01

Time: _____

Case/Registration No. R #11339	Name Ash Grove Cement Co.	Responsible Person, Title Henrik Voldback		
Site Address 3801 E Marginal Way S	City Seattle	Zip 98134	County King	
Mailing Address As Above	City, State Seattle, WA.	Zip 98134	Phone (206) 623-5596	

- No Further Written Response required. These violations will not be subject to penalty per the 9/10/98 interim CEM policy which is not Board approved. ^{subject to change.}
- ☐ I observed no violations of our agency's regulations during my inspection in the areas I inspected.
- ☐ I could not make a compliance determination because:
- ☐ I need to consult with others. I will share my conclusions with you either in person, over the phone, or in writing by _____.
 - ☐ I need more information. Please submit the following information by _____.

In your future CEM reports please include Date & max value for all pollutants exceeding standard. During our review of your January 2001 CEM report, we observed the following violations:

Date	Pollutant	Standard
1/2/01	opacity	Reg. I 9.04 (c)(1) 5% 1 hr.
1/3/01	opacity	Reg. I 9.04 (c)(2) 20% 6 min
1/3/01	opacity	Reg. I 9.04 (c)(1) 5% 1 hr
Date Not Reported	SO ₂	NC 7381 # 5 (e) Max Value Not Reported 1 hr.
Date Not Reported	NO _x	NC 7381 # 5 (b) " "

Issued By: *[Signature]* Received By: _____

Date/Time: _____

[Signature] 3/30/01



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Compliance Status Report

Inspection Date: 11/14/01

Time:


Case/Registration No. 11339	Name Ash Grove Cement Co	Responsible Person, Title Henrik Voldbaek, Plant Manger	
Location (Address) 3801 E. Marginal Way South	City Seattle, WA	Zip 98134	County King
Mailing Address 3801 E. Marginal Way South	City, State Seattle, WA	Zip 98134	Phone 206-623-5596

- ☒ We observed no violations of our Agency's regulations during our review of your September 2001 CEM report.
- ☐ I could not make a compliance determination because:
- ☐ I need to consult with others. I will share my conclusions with you either in person, over the phone, or in writing by
- ☐ I need more information. Please submit the following information by :

Issued by:



Date/Time:

 11.16.01

Received by


signature

print name

Signing this document is not an admission of guilt